

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Any</i>		8/28
O.E. CLASSIFIER		<i>W/S</i>	9/5
FORMALITY REVIEW	<i>A-1</i>	<i>1021</i>	10/28
RESPONSE FORMALITY REVIEW	<i>12</i>	<i>94</i>	11/2

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Carried
 + Restricted

Claim	Final	Original	Date
1	0	2/5/03	11/6/2/03
2	0		
3	0		
4	0		
5	0		
6	0		
7	0		
8	0		
9	0		
10	0		
11	0		
12	0		
13	0		
14	0		
15	0		
16	0		
17	0		
18	0		
19	0		
20	0		
21	0		
22	0		
23	0		
24	0		
25	0		
26	0		
27	0		
28	0		
29	0		
30	0		
31	0		
32	0		
33	0		
34	0		
35	0		
36	0		
37	0		
38	0		
39	0		
40	0		
41	0		
42	0		
43	0		
44	0		
45	0		
46	0		
47	0		
48	0		
49	0		
50	0		

Claim	Final	Original	Date
51	0		
52	0		
53	0		
54	0		
55	0		
56	0		
57	0		
58	0		
59	0		
60	0		
61	0		
62	0		
63	0		
64	0		
65	0		
66	0		
67	0		
68	0		
69	0		
70	0		
71	0		
72	0		
73	0		
74	0		
75	0		
76	0		
77	0		
78	0		
79	0		
80	0		
81	0		
82	0		
83	0		
84	0		
85	0		
86	0		
87	0		
88	0		
89	0		
90	0		
91	0		
92	0		
93	0		
94	0		
95	0		
96	0		
97	0		
98	0		
99	0		
100	0		

Claim	Final	Original	Date
101	0		
102	0		
103	0		
104	0		
105	0		
106	0		
107	0		
108	0		
109	0		
110	0		
111	0		
112	0		
113	0		
114	0		
115	0		
116	0		
117	0		
118	0		
119	0		
120	0		
121	0		
122	0		
123	0		
124	0		
125	0		
126	0		
127	0		
128	0		
129	0		
130	0		
131	0		
132	0		
133	0		
134	0		
135	0		
136	0		
137	0		
138	0		
139	0		
140	0		
141	0		
142	0		
143	0		
144	0		
145	0		
146	0		
147	0		
148	0		
149	0		
150	0		

Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

10/18/01
 10/18/01
 10/18/01